EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER <u>EACH</u> OF THESE QUESTIONS

V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?

Yes

Š

appropriate schedule attached for each "Yes" response

Each question in this part must be answered and the

if yes, complete and attach Schedule V.

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes

8

X

Yes

₹ X

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because

they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics

Name
i Cary
Gardner
Page 2

SCHEDULE I— EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

						CAbi. LLC	High Plains Communications, LLC	Colorado General Assembly	Ontario County Board of Education		Keene State	Source
						Sporse Salary	Sponse Schory	Salary	Spouse Salary	Legislative Pension	Approved Teaching Fee	Туре
						<i>NA</i>	NA	\$30,000	NA NA	\$9,000	\$6,000	Amount

BLOCK A

Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other more than \$200 in "unearned" income during the year. reportable asset or sources of income which generated

not use ticker symbols.) Provide complete names of stocks and mutual funds (do

value at the end of the reporting period. the name of the institution holding the ac ment accounts which are not self-directed account that exceeds the reporting threshol investments), provide the value for each asset held in the the power, even if not exercised, to select the specific For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (*i.e.*, plans in which you have

For rental or other real property held for invide a complete address.

For an ownership interest in a privately-h that is not publicly traded, state the name tion in Block A. ness, the nature of its activities, and its gec

from, a federal retirement program, includ accounts; and any financial interest in, or in ing \$5,000 or less in a personal checki income during the reporting period); any d homes and vacation homes (unless then Exclude: Your personal residence, inclu

income source is that of your spouse (SP) child (DC), or is jointly held with your spous optional column on the far left. If you so choose, you may indicate that

please refer to the instruction booklet. For a detailed discussion of Schedule III r

SP

DC, Examples:

Simon & Schuster Mega Corp. Stock

1st Bank of Paducah, I

Pabliz Employee

Bontof Calvado

(bonquaity

They since

Value of Asset **BLOCK B**

please specify the method used method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

generated income, the value should be year and is included only because it If an asset was sold during the reporting

BLOCK C

Type of Income

if the asset generated no income durgains, even if reinvested, must be Dividends, interest, and capital may check the "None" column. (such as 401(k) plans or IRAs), you that generate tax-deterred income you to choose specific investments or Check all columns that apply. For ing the reporting period. disclosed as income. Check "None" retirement accounts that do not allow

BLOCK D

Amount of Income Transaction BLOCKE

that generate tax-deferred income (such you to choose specific investments <u>or</u> For retirement accounts that do not allow asset had Indicate if the

was earned or generated. as income. Check "None" if no income Dividends, interest, and capital gains, checking the appropriate box below. indicate the category of income by the "None" column. For all other assets, as 401(k) plans or IRAs), you may check even if reinvested, must be disclosed \$1,000 in sales (S), or reporting year. exceeding exchanges (E) purchases (P)

None >	. Fund CIA	IRA	CD	Bank CO	. Cr. Union	lyec Retirement	aducah, KY Accounts	uster	stock	g the account and its eriod. Id for investment, provivately-held business he name of the business he name of the busined its geographic locate, including second eas there was rentall; any deposits total-I checking or saving in, or income derived in, or income derived in, including the Thrift ate that an asset or se (SP) or dependent ur spouse (JT), in the dule III requirements, let.	thresholds. For retire-
\$1,001 - \$15,000										None >	
X \$50,001 - \$100,000		1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	×					ᇗ		\$1 = \$1,000 P	
X \$50,001 - \$100,000	×	1000 TO		X	×	2 ~ 850 30.00.2	80.2° N	efini	100000	Ψ1,00: Ψ10,000	
\$250,001 - \$500,000		X						ē			
\$250,001 - \$500,000		12.71.25	213	N 227			2000		×	ψοσ,σσ1 - ψτσσ,σσσ	**
Section Sect				12.334			(m)				
\$1,000,001 - \$5,000,000										Ψ200,001 - Ψ000,000	8
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\$25,000,001 - \$50,000,000			7.54 <u>%</u> \$								
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X CAPITAL GAINS SECRET PER CHARGE	- X (X	3	73						
Content to the transfer Content to the t			A . Take				2230		×		
Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None Simple \$201 - \$1,000 \$201 - \$1,000 \$2,501 - \$5,000 \$3,500 - \$1,000 \$3,500 - \$1,000,000 \$3,500 - \$1,000,000 \$3,500 - \$1,000,000 \$4,500 - \$1,000,000 \$5,000 - \$1,000,000 \$5,000 - \$1,000,000 \$5,000 - \$1,000,000 \$5,000 - \$1,000,000 \$5,000 - \$1,000,000											
\$1 - \$1,000 \(\operatorname{\								Royalties			
\$201 - \$1,000 \(\) \(\	222	×	*****			X			- No.	None –	
X \$1.001 - \$5,000 <	*		7	7	7.5					\$1- t ext =	
\$2,501 - \$5,000 < \$2,501 - \$5,000			20101124			# 600600000000000	300002	. X8006-10			
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Over \$5,000,000 ≚			an ji							MANUAL PROPERTY AND A STATE OF THE STATE OF	8
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										f only a portion of an saset is sold, slease indicate as follows: (S) (partial) See below for example. P, S, E	9

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)					Γ	(O/4)		Caron w		
BLOCK A		вгоск в			BLOCK C		-	вгоск в		BLOCK E
Asset and/or Income Source	<u> </u>	Year-End	<u>P</u>		Type	-	Am	Amount of Income	ncome	Transaction
SP.	A B C	E # G ##	•				=	W V W VII	×	<u>×</u>
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<u>Т</u>	ANSON CONTRACTOR	0,000 50,000 00,000	\$50,0		, NE				666 00,000 608.0	
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	None \$1 \$1 \$1,001	\$50,00 \$166,0 \$250,0	\$1,000 \$8,000 \$25,00	NONE DAVIDA RENT	CAPITA EXCITA Other 1	(Specif Partne Farm I	None \$1 \$2 \$201	\$2,501 \$2,501 \$5,601 \$15,001	\$100,00 \$1,000	Over \$5
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SCHEDULE IV— TRANSACTIONS

Name Cory Gordon

Page 5 of 7

										Pfizer Inc.	SP Example: Mega Corporation Common Stock (partial sale)	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates containing the providence of an asset is sold please an indi-	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that
													PURCHA	36	Type of Transaction
						:		,		×	×		SALE		Type
		20 - 6 20 - 6 20 - 6 20 - 6											EXCHAN		tion
							-						Check Box Gain Excee	if Capital ded \$200)
										6-27-6	10-12-10		Monthly, or Bi-weekly, if applicable	(MO/DAY/YR)	Date
										X.			\$1,001- \$15,000		
											×	8072	\$15,001- \$50,000	Ø	
													\$100,001- \$100,000	•	Amc
	1.75%	1963					_					93.23	\$100,001- \$250,000	U	Amount of
													\$256 001- \$566 000 \$500,001-	m	of Tra
	3 3 3		72.33										\$1,000,000 \$1,000,001-	π	Transaction
	31933												\$5,000,000 \$5,000,001-		ction
		10 Sept.											\$25,000,000		
				2									Over \$50,000,000	·	1

SCHEDULE V— LIABILITIES

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Page 6 of 7

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

. 🗆 .	JT D SP.	Creditor	Date Liability Incurred Mo/Year	Type of Liability	\$16,001- \$15,000 \$15,001-	\$50,000 \$50,000 \$100,000	\$100,001- \$250,000	\$250,001- \$250,001- \$500,000- \$1,000,000-	\$1,000,000 T a	\$5,000,001	\$25,000,001- \$25,000,001-	
		Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE			×					
		Foleral Student Gan	Nov Zool	Student Lona	<u> </u>	<u> </u>						J.72
·							SEE 18 12 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13					
							SAC 7 7 2 3					18.15

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

	 			_
		Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
		Silver Platter (determination on personal friendship received from Committee on Standards)	Description	
		 \$345	Value	

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position	Name of Organization
[wenting Director (comme)	Colorado Rejource Alliance

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement